



**CAMPAIGN FINANCIAL DISCLOSURE REPORT**  
SUMMARY PAGE  
(Please Print or Type)

**Section I**

Name of Candidate or Political Committee and Chairperson <i>Marquerite McLaughlin</i>		Office Sought (if candidate) <i>Senate</i>	District (if any) <i># 7</i>
Mailing Address <i>704 Floyd Ave.</i>	<input type="checkbox"/> Check if address change.	City and Zip <i>Orosi, 83544</i>	Home Phone <i>208-476-4136</i>
Name of Political Treasurer <i>Mary Anne McLaughlin</i>		STATE OF IDAHO	
Mailing Address <i>120 Highland Ct.</i>	<input type="checkbox"/> Check if address change.	City and Zip <i>Orosi 83544</i>	Home Phone <i>208-476-5379</i>
			Work Phone <i>Same</i>

**Section II**

**TYPE OF REPORT**

Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(es). See the instructional manual for reporting periods and due dates.

This report is for the period from 11/1/99 through 12/31/99

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report      | <input type="checkbox"/> 7 Day Pre-General Report   | CI Quarterly (April 30)<br>(only filed by ballot measure committees) |
| <input type="checkbox"/> 30 Day Post-Primary Report    | <input type="checkbox"/> 30 Day Post-General Report | CI Quarterly (July 30)<br>(only filed by ballot measure committees)  |
| <input type="checkbox"/> October 10 Pre-General Report | <input checked="" type="checkbox"/> Annual Report   |  |

Is this Report an amendment?     Is this a Termination Report? CI Yes  No

**Section III**

**STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES**

Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below, fill in the appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

I hereby certify that I have received no contributions and have made no expenditures during this reporting period from        /        /        through        /        /       

**Section IV**

**SUMMARY**

To reach your Calendar Year to Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Year*	\$ <u>xxxxxx</u>	\$ <u>340.25</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>340.25</u>	\$ <u>xxxxxx</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>850.00</u>	\$ <u>850.00</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>1190.25</u>	\$ <u>1190.25</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>437.89</u>	\$ <u>437.89</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>752.36</u>	\$ <u>752.36</u>

\*This same figure should be entered on line 1 of all reports filed this calendar year.

\*\*You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period.

Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

**Section V**

**CONTRIBUTIONS PLEDGED - INCURRED EXPENDITURES**

Contributions Pledged during this reporting period but not yet received:  None  \$ \_\_\_\_\_ (see attached Schedule C-2A)

Incurred Expenditures during this reporting period but not yet paid:  None  1\$ \_\_\_\_\_ (see attached Schedule C-2B)

**Return** This Report To:  
**Pete T. Cenarrusa**  
Secretary of State  
PO Box 83720  
Boise ID 83720-0080  
fax: (208) 334-2282

**Section VI**

**CERTIFICATION**

I Marquerite McLaughlin hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

*Marquerite McLaughlin*  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee <i>Marguerite McLaughlin</i>	Report Covering the Period F r o m <i>1/1/99</i> to <i>12/31/99</i>
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### UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total N u m b e r <u>  0  </u>	Total A m o u n t \$ <u>  0  </u>
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### UNITEMIZED EXPENDITURES

Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total N u m b e r <u>  2  </u>	Total A m o u n t \$ <u> 38.38 </u>
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	Total This Period
Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ - a -
Itemized Contributions (total all Schedule A sheets)	\$ <i>850.00</i>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <i>850.00</i>
Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <i>38.38</i>
Itemized Expenditures (total all Schedule B sheets)	\$ <i>399.51</i>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <i>437.89</i>

**SCHEDULE A**  
**ITEMIZED CONTRIBUTIONS**  
of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee:  
Marquerite Mahughlin

		Column A	Column B	Column C
Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
<u>2/18/99</u>	1. <u>Idaho Hospital Assoc.</u> <u>P.O. Bx 1278</u> <u>Boise, Id. 83701-1278</u>	\$ <u>200.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>200.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>8/20/99</u>	2. <u>Allstate Ins. Group</u> <u>10901 Gold Ct. Drive</u> <u>Suite 400</u> <u>Rancho Cordova Ct. 95670</u>	\$ <u>200.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>200.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>12/8/99</u>	3. <u>AT &amp; T</u> <u>1875 Lawrence St.</u> <u>Denver, Colo. 80202</u>	\$ <u>200.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>200.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>12/22/99</u>	4. <u>R.J. Reynolds</u> <u>P.O. Bx 2955</u> <u>Winston Salem, N.C.</u> <u>27102</u>	\$ <u>250.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>250.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>   /   /   </u>	5.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>   /   /   </u>	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>   /   /   </u>	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>   /   /   </u>	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>   /   /   </u>	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>   /   /   </u>	10.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
Subtotals of Columns A, B & C		\$ <u>850.00</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ <u>850.00</u>

**SCHEDULE B  
ITEMIZED EXPENDITURES**

of Twenty-Five Dollars (\$25.00) or more this period

Name of Candidate or Committee  
Marquerite McLaughlin

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<u>7/20/99</u>	1. <u>Orosino Postmaster</u> <u>Orosino, Id. 83544</u>	\$ <u>33.06</u>	\$
Purpose of Above Expenditure: <u>Stamps.</u>			
<u>7/27/99</u>	2. <u>Clearwater Co Democratic Central</u> <u>Cliff Lunn Call</u> <u>514 138th St. Orosino, 83544</u>	\$ <u>50.00</u>	\$
Purpose of Above Expenditure: <u>Donation</u>			
<u>9/15/99</u>	3. <u>Country Bouquet</u> <u>Bx 784</u> <u>Orosino, 83544</u>	\$ <u>50.01</u>	\$
Purpose of Above Expenditure: <u>Parade material.</u>			
<u>9/17/99</u>	4. <u>Orosino Bldrs Supply</u> <u>3% 511</u> <u>Orosino, 83544</u>	\$ <u>30.88</u>	\$
Purpose of Above Expenditure: <u>Parade Material</u>			
<u>11/16/99</u>	5. <u>Costco</u> <u>Clarkston, Wash.</u>	\$ <u>51.22</u>	\$
Purpose of Above Expenditure: <u>Computer paper etc.</u>			
<u>11/27/99</u>	6. <u>Orosino Postmaster</u> <u>Orosino, 83544</u>	\$ <u>33.00</u>	\$
Purpose of Above Expenditure: <u>Stamps</u>			
<u>12/10/99</u>	7. <u>Valley Graphics</u> <u>Bx 1047</u> <u>Orosino 83544</u>	\$ <u>31.40</u>	\$
Purpose of Above Expenditure: <u>Stationary - Christmas Cds.</u>			
<u>12/28/99</u>	8. <u>Idaho St. Democrat's</u> <u>P.O. Bx 445</u> <u>Boise, Id. 83501</u>	\$ <u>120.00</u>	\$
Purpose of Above Expenditure:			
<u>  /  /  </u>	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ <u>399.51</u>	\$
Total This Page (add columns A & B)			\$ <u>399.51</u>